PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) FRIENDS OF CONGRESSMAN STEVE STOCKMAN PO BOX 57135 ADDRESS (number and street) (Check if address is changed) WEBSTER 77598 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS .ilokota@aol.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00518241 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. JASON TYLER POSEY Type or Print Name of Treasurer JASON TYLER POSEY [Electronically Filed] 09 15 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

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TYPE OF COMMITTEE		
Candidate Committee:		
(a) X This committee is a principal campa	ign committee. (Complete the candidate information below.)	1
(b) This committee is an authorized cominformation below.)	nmittee, and is NOT a principal campaign committee. (Com	plete the candidate
Name of Candidate STEVE STOCKMAN		
Candidate REP Office Sought:	X House Senate President	State TX District 36
(c) This committee supports/opposes on	ly one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):		
(e) This committee is a separate segreg	ated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative
In addition, this comm	ittee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes m committee. (i.e., nonconnected comm	ore than one Federal candidate, and is NOT a separate se	egregated fund or party
In addition, this committee is a	a Lobbyist/Registrant PAC.	
In addition, this committee is a	a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:		
	pays fundraising expenses and disburses net proceeds for two of which is an authorized committee of a federal candidate.	vo or more political
	pays fundraising expenses and disburses net proceeds for twich is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint Fund	raiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

••••	age# 10041400001		
Γ	_		
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٧	Write or Type Committee Nam	ne	
	FRIENDS OF (CONGRESSMAN STEVE STOCKMAN	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
Т	EXANS FOR TEXA	NS 	
L			
	Mailing Address	2470 DANIELL'S BRIDGE ROAD	
	-	STE. 121	
		ATHENS GA 30606-6191	I-I I
		CITY STATE ZIP	CODE
	books and records.	entify by name, address (phone number optional) and position of the person in posses	sion of committee
	Full Name	TLER FOSET	
	Mailing Address	211 North Union St.	
		SUITE 100	
		ALEXANDRIA VA 22314	
	Title or Position	CITY STATE ZIP	CODE
	TREASURER		9746
3.	Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name JASON T of Treasurer	YLER POSEY	
	Mailing Address	211 North Union St.	
		SUITE 100	1

CITY STATE ZIP CODE

Title or Position
TREASURER
Telephone number

Telephone number

22314

VA

ALEXANDRIA

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number]
safety deposit boxes of Name of Bank, Deposit		
Name of Bank, Deposi	r maintains funds. itory, etc. ELLS FARGO P.O.BOX 266000	5326
Name of Bank, Deposi	r maintains funds. itory, etc. ELLS FARGO P.O.BOX 266000	5326 ZIP CODE
Name of Bank, Deposi	r maintains funds. itory, etc. ELLS FARGO P.O.BOX 266000 DALLAS TX TX TX TX TX TX TX TX TX T	
Name of Bank, Deposi	r maintains funds. itory, etc. ELLS FARGO P.O.BOX 266000 DALLAS TX TX TX TX TX TX TX TX TX T	
Name of Bank, Deposi Mailing Address Name of Bank, Deposi	r maintains funds. itory, etc. ELLS FARGO P.O.BOX 266000 DALLAS CITY STATE TX 75 CITY STATE	

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı Şun Tryst Bank P. O. BOX 4418 Mailing Address 30302-4418 GΑ **ATLANTA** CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number